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Bib Data Sheet

CONFIRMATION NO. 1237

SERIAL NUMBER 09/067,544	FILING DATE 04/27/1998 RULE	CLASS 709	GROUP ART UNIT 2758	ATTORNEY DOCKET NO. ALA-002
APPLICANTS LAURENCE B. BOUCHER, SARATOGA, CA; STEPHEN E. J. BLIGHTMAN, SAN JOSE, CA; PETER K. CRAFT, SAN FRANCISCO, CA; DAVID A. HIGGEN, SARATOGA, CA; CLIVE M. PHILBRICK, SAN JOSE, CA; DARYL D. STARR, MILPITAS, CA;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/061,809 10/14/1997				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/19/1998				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS, DRAWING 14	TOTAL CLAIMS 54
INDEPENDENT CLAIMS 11				
ADDRESS MARK LAUER 7041 KOLL CENTER PARKWAY SUITE 280 PLEASANTON, CA 94566				
TITLE INTELLIGENT NETWORK INTERFACE SYSTEM METHOD FOR PROTOCOL PROCESSING				
FILING FEE RECEIVED 2302	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART	ATTORNEY DOCKET NO.
09/067,544	04/27/98	711	2751	ALA-002

APPLICANT

LAURENCE B. BOUCHER, SARATOGA, CA; STEPHEN E. J. BLIGHTMAN, SAN JOSE, CA;
 PETER K. CRAFT, SAN FRANCISCO, CA; DAVID A. HIGGEN, SARATOGA, CA;
 CLIVE M. PHILBRICK, SAN JOSE, CA; DARYL D. STARR, MILPITAS, CA.

****CONTINUING DOMESTIC DATA*******

VERIFIED

NA

****371 (NAT'L STAGE) DATA*******

VERIFIED

NA

Revised

****FOREIGN APPLICATIONS*******

VERIFIED

NA

FOREIGN FILING LICENSE GRANTED 06/19/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	Examiner's Initials <u>Dr</u> Initials _____	CA	14	54	11

ADDRESS

MARK LAUER

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~~DUBLIN CA 94568~~

Pleasanton, CA 94566

*7041 Koll Center Parkway
Suite 250*

TITLE

INTELLIGENT NETWORK INTERFACE SYSTEM METHOD FOR PROTOCOL PROCESSING

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
\$2,302		